



NEW Event for 2023 - 2024

These guidelines are written for ILC. States may modify events or have different event processes and deadlines. Be sure you check with your local/state advisors (or state websites) to determine how the events are implemented for all regional and state conferences. Skill events now require attire appropriate to the occupational area be worn for Round 2.

February 2024: To help competitors prepare for round two, the American Association for Respiratory Care has developed videos demonstrating the skills. These videos are available [HERE](#). If any small discrepancies are noted, competitors at ILC will be scored based on the published rubric guidelines. Skill IV Step #8b has been removed.

Event Summary

The respiratory therapy event provides members with the opportunity to gain knowledge and skills required in respiratory therapy. This competitive event consists of 2 rounds. Round One will offer competitors the opportunity to gain knowledge about this career path through an interview, research, and a presentation to judges. Top scoring competitors will advance to Round Two for the clinical skill assessment. This event aims to inspire members to learn more about respiratory careers, use critical thinking skills, and become allied health professionals who can respond and assist efficiently in clinical settings.

Sponsorship

This competitive event is sponsored by the [American Association for Respiratory Care](#). They have developed a [special landing page](#) for HOSA competitors and advisors.



**American Association
for Respiratory Care**

Competitors must provide:

- ☐ A [photo ID](#)
- ☐ Non-latex gloves, gown, goggles or safety glasses, mask, eye shield or face guard
- ☐ Two #2 lead pencils (not mechanical) with eraser for both rounds
- ☐ Sterile gloves
- ☐ Index cards or electronic notecards (optional)
- ☐ Any battery-operated device and presentation aids/tools needed to support the round 1 presentation

Dress Code

Competitors shall wear proper business attire or official HOSA uniform for round 1. Round 2 skill events require attire appropriate to the occupational area be worn. Bonus points will be awarded for [proper dress](#).

General Rules

1. Competitors in this event must be active members of HOSA and in good standing.
2. **Eligible Divisions:** Secondary and Postsecondary/Collegiate divisions are eligible to compete in this event.
3. Competitors must be familiar with and adhere to the "[General Rules and Regulations of the HOSA Competitive Events Program \(GRR\)](#)."
 - A. Per the [GRRs](#) and [Appendix H](#), HOSA members may request accommodation in any competitive event. To learn the definition of an accommodation, please read [Appendix H](#). To request accommodation for the International Leadership Conference, [submit the request form here](#) by May 15 at midnight EST.
 - B. To request accommodation for any regional/area or state level conferences, submit the request form [here](#) by your state published deadline. Accommodations must first be done at state in order to be considered for ILC.
4. All competitors shall report to the site of the event at the time designated for each round of competition. At ILC, competitor's [photo ID](#) must be presented prior to ALL competition rounds.

Round One Summary

5. Round One will offer competitors the opportunity to [research respiratory therapist careers and topics](#), interview a respiratory therapist, and create a presentation based on their research.

Round One Interview and Research

6. To help research the needed information for the round one presentation described below, competitors will select a Registered Respiratory Therapist who has knowledge of their selected topic from item #10.
7. Competitors will conduct an interview with their selected Respiratory Therapist and ask questions to help them learn more about the career and about the topic they selected for their presentation. Assistance with locating a Respiratory Care program if needed can be found [HERE](#).
8. Competitors and interviewees can discuss and determine an appropriate length and format of the interview (in-person, via Zoom, via telephone, etc.).

Round One Suggested References

9. The following references may be helpful to competitors in developing their round one interview questions and presentation material:
 - a. Asthma Disease Management
 - i. <https://www.cdc.gov/asthma/default.htm>
 - ii. <https://medlineplus.gov/asthma.html>
 - iii. <https://ginasthma.org/pocket-guide-for-asthma-management-and-prevention/>
 - b. COPD Disease Management
 - i. <https://www.cdc.gov/copd/index.html>
 - ii. <https://medlineplus.gov/copd.html>
 - iii. <https://goldcopd.org/2023-gold-report-2/>
 - c. Vaping / Smoking Cessation

- i. <https://www.cdc.gov/tobacco/campaign/tips/quit-smoking/>
- ii. https://www.cdc.gov/tobacco/basic_information/e-cigarettes/index.htm
- iii. <https://medlineplus.gov/smoking.html>
- iv. <https://medlineplus.gov/ecigarettes.html>
- v. <https://www.hhs.gov/surgeongeneral/reports-and-publications/tobacco/2020-cessation-sgr-factsheet-key-findings/index.html>

Round One Presentation Content

10. The eight (8) minute presentation for judges will include:

- a. Information about respiratory careers
 - i. Demand and Occupational Outlook
 1. Research the need for RTs and why now is the time to consider this career path <https://moreerts.com/growing-need/>
 - ii. Educational pathways and requirements
 1. Outline the education needed to become an RT and opportunities for professional growth through advanced degrees and specialty credentialing <https://be-an-rt.org/find-your-path/>
 - iii. Overview of the profession
 1. Explain the benefits and challenges of being an RT, the various health care environments RTs serve and their role on these health care teams
- b. Research about respiratory therapy assessment and interventions that are relevant to ONE of the selected topics below: (competitors will select ONE topic)
 - i. Asthma Disease Management
 1. What is asthma and how does a RT play a role in asthma disease management?
 2. Share tips about asthma education
 3. Develop a sample asthma management plan
 4. Describe or demonstrate how a peak flow meter is used
 5. Explain the importance of good asthma management
 - ii. COPD Disease Management
 1. What is COPD and how does a RT play a role in COPD management?
 2. Share tips about COPD education
 3. Develop a sample COPD management plan
 4. Describe or demonstrate how a spirometer is used
 5. Explain the importance of COPD management, particularly related to pulmonary rehabilitation
 - iii. Smoking / Vaping Cessation
 1. What is the respiratory impact of smoking and vaping and how does a RT play a role in smoking/vaping cessation?
 2. Share tips about smoking / vaping cessation
 3. Develop a sample smoking / vaping cessation plan
 4. Describe various long term health issues caused by smoking/ vaping.
 5. Explain the importance of smoking / vaping cessation

Round One Presentation Details and Competitive Process

11. Competitors will create an educational and creative presentation – “How does a Respiratory Therapist Play a Role with _____(insert selected topic from item #10)” - that will be shared with judges during competition. The exact presentation title can be of the competitor’s choosing.
12. The presentation will be a maximum of eight (8) minutes long.
13. Competitors may use any presentation aids/tools/technology they wish – Prezi, PowerPoint, Bulb, video clips, videos, photos, posters, handouts, etc. – but the competitors must speak during the presentation and only use the aids to enhance the message they are trying to convey. In other

words, competitors should not simply record something ahead of time and push “play” – the presentation should be given live for the judges.

14. Competitors should be creative in how the content is presented to capture the attention of the judges and share what they learned about Respiratory Therapy as it relates to their chosen disease management or cessation topic.
15. The content can be organized and presented in any manner the competitor wishes – the most compelling and unique ways of sharing the content will be most successful.
16. Competitors will report to the event site at their appointed time with any pre-made presentation aids/tools/technology to support their presentation. HOSA only provides one table. Any other equipment and presentation needs must be provided by the competitor.
17. Upon entering the competition room, competitors will have two (2) minutes to setup any presentation equipment/materials.
18. Competitors will NOT have access to electricity. Battery powered equipment (such as a laptop) is permitted. Internet connection is NOT provided but can be used if provided by the competitor via a Wi-Fi hotspot or other source.
19. Use of index card notes during the presentation are permitted. Electronic notecards (on a tablet, smart phone, laptop, etc.) are permitted, but may not be shown to the judges.
20. The timekeeper will announce when the two (2) minute setup time is complete; and when there is one (1) minute remaining in the presentation. The timekeeper will stop the presentation after eight (8) minutes and the competitor will be excused.

Advancing from Round One to Round Two

21. The presentation score from Round One will be used to qualify the competitor for Round Two.

Round Two References

22. The references below were used in the development of the round two skill rating sheets.
23. [Kacmarek, Stoller & Heuer. *Egan’s Fundamentals of Respiratory Care*. Elsevier. Latest edition.](#)
24. [Simmers, Simmers-Nartker, Simmers-Kobelak, & Fuller. *DHO Health Science*. Latest edition.](#)
25. [American Association for Respiratory Care](#)

Round Two Skills

26. Round Two is the performance of a selected skill(s). The Round Two skills approved for this event are:

Skill I:	Basic Airway Management	4 minutes
Skill II:	Donning & Removing Transmission-Based Isolation Garments	4 minutes
Skill III:	Administering Oxygen via Nasal Cannula	6 minutes
Skill IV:	Pulse Oximetry	4 minutes
Skill V:	Assessment of the Newborn	5 minutes
Skill VI:	Vital Signs	8 minutes
Skill VII:	Hand-held Nebulizer	8 minutes

(FOR ALL SKILLS, BODY FLUIDS WILL BE A SIMULATED PRODUCT)

27. The selected skill(s) will be presented to competitors as a written scenario at the beginning of the round. The scenario will be the same for each competitor and will include a challenging component that will require the competitors to apply critical thinking skills. A sample scenario can be found [here](#).

28. Timing will begin when the scenario is presented to the competitor and will be stopped at the end of the time allowed.
29. The scenario is a secret topic that includes the Physician's Orders for the skill(s) to be performed. Competitors MAY NOT discuss or reveal the secret topic until after the event has concluded or will face penalties per the [GRRs](#).
30. Judges will provide information to competitors as directed by the rating sheets. Competitors may ask questions of the judges while performing skills if the questions relate to patient's condition and will be included in the scenario or judge script.

Final Scoring

31. The competitor must earn a score of 70% or higher on the combined skill(s) of the event to be recognized as an award winner at the ILC.
32. Final rank is determined by adding the round one presentation score plus round two skill score. In case of a tie, the highest presentation score will be used to determine the rank.

RESPIRATORY THERAPY ROUND 1 – Judge's Rating Sheet

Section # _____

Division: _____ SS _____ PS/Collegiate

Competitor # _____

Judge's Signature _____

A. Overview	Excellent 5 points	Good 4 points	Average 3 points	Fair 2 points	Poor 0 points	JUDGE SCORE
1. Live Presentation for Judges	Presentation for Judges is given live and not a recording.	N/A	N/A	N/A	Presentation was recorded.	
B. Presentation Content	Excellent 10 points	Good 8 points	Average 6 points	Fair 4 points	Poor 0 points	JUDGE SCORE
1. Overall understanding / coverage of Demand and Occupational Outlook	Exceptional presentation of the demand and outlook for the occupation. It is evident the competitor researched and understands this career and why the time is now to consider this career path.	The presentation of occupational demand is mostly clear and is provided, but some details are missing.	The presentation is somewhat vague and does not clearly show an understanding of the demand and outlook of the occupation.	The presentation is unclear with little information provided on the demand and outlook of the occupation.	Presentation does not provide information regarding the demand and outlook of the occupation.	
2. Overall understanding / coverage of educational pathways and requirements	Presentation includes detailed information along with excellent descriptions of the educational pathways and requirements to becoming a Registered Respiratory Therapist.	Information regarding educational pathways and requirements were provided and described.	Presentation includes a short description of the educational pathways and requirements but there were gaps in the information provided.	The information provided in the presentation provided an incomplete description of the educational pathways and requirements.	Presentation is unclear and does not provide information regarding educational pathways and requirements	
3. Overview of the Respiratory Therapist profession	Presentation includes detailed information along with excellent descriptions about the benefits and challenges of the Respiratory Therapy profession as well as their role in the healthcare team. The career picture painted is clear and exciting to the listener.	Basic benefits and challenges about the Respiratory Therapy profession were provided and described, and some key content about the RT's role in the healthcare team was included.	Presentation includes a short overview of the Respiratory profession, including some benefits and challenges, but there were gaps in the information provided.	The information in the presentation provided an incomplete overview of the Respiratory profession. Minimal benefits, challenges, or role within the healthcare team was shared.	Presentation is unclear and does not provide an overview of the Respiratory profession.	
4. Chosen Disease/Behavior Topic Description and how the RT plays a role	Exceptional description of the selected topic with numerous details and a clear outline of how the RT plays a role in the management of the selected topic. The competitor obviously understands the integration and connection between the topic and the RT.	The topic is clearly explained and there is good description of the RT's role in the management of the selected topic. The competitor shares a basic connection between the topic and the RT.	The presentation includes some information on the selected topic and a few connections to the RT, but details are lacking.	The presentation starts to hit key points about the selected topic and the RT's role, but largely misses the mark.	The presentation is unclear and does not provide information about the selected topic or RT's role.	

Presentation Content	Excellent 10 points	Good 8 points	Average 6 points	Fair 4 points	Poor 0 points	JUDGE SCORE
5. Tips shared about Chosen Disease/ Behavior Topic	The tips shared about the selected topic are accurate, relevant, significant and presented in a way that the audience can understand and relate to. The tips greatly enhance the overall presentation.	The tips shared about the selected topic are relevant and accurate but lack the "wow" factor.	Some of the tips shared about the selected topic are not accurate or may not be relevant. They are shared but not in a way that enhances the presentation for the audience.	The presentation lacks accurate tips about the selected topic. The competitor made an attempt but did not select appropriate information.	The presentation does not include tips about the selected topic.	
6. Sample management / cessation plan	A fabulous sample management plan / cessation plan is included in the presentation. It clearly outlines the steps for the patient and is presented in a way that will greatly engage and encourage the patient to follow the plan.	A sample management / cessation plan is included in the presentation and covers the important points the patient needs to follow. It does a good job engaging the patient.	A sample management / cessation plan is included in the presentation but some of the information shared is inaccurate or not appropriate.	Portions of a sample management / cessation plan are shared in the presentation but correct content and relevance is missing.	The presentation does not include a sample management / cessation plan.	
7. Inclusion of RT medical equipment describing/demonstrating how a peak flow meter or spirometer is used <i>(if the asthma or COPD topic is selected)</i> -----OR----- Inclusion of long term health issues caused by smoking/vaping <i>(if the Smoking/Vaping topic is selected)</i>	<p>The competitor does an excellent job describing and/or demonstrating how to use the applicable medical equipment for their selected topic. They have a clear command of the therapy and why it is used.</p> <p>----- OR -----</p> <p>The competitor does an excellent job describing the long term health issues caused by smoking / vaping. They have a clear command of the content and numerous important and relevant details were included.</p>	<p>The competitor does a good job describing and/or demonstrating how to use the applicable medical equipment for their selected topic. They cover most key points in a satisfactory manner.</p> <p>----- OR -----</p> <p>The competitor does a good job describing the long term health issues caused by smoking / vaping. They cover most key points about the health issues in a satisfactory manner.</p>	<p>The competitor includes the content and does describe and/or demonstrate how to use the applicable medical equipment, but there are some important areas missing.</p> <p>----- OR -----</p> <p>The competitor includes some content and does describe some health issues caused by smoking / vaping, but there are important areas missing.</p>	<p>The competitor tries to describe and/or demonstration how to use the applicable medical equipment, but largely shares inaccurate or not enough information to really make a difference.</p> <p>----- OR -----</p> <p>The competitors tries to describe long term health issues caused by smoking / vaping, but largely shares inaccurate or not enough information to really make a difference.</p>	<p>The presentation does not include the description or demonstration of the medical equipment.</p> <p>----- OR -----</p> <p>The presentation does not include a description of the long term health issues caused by smoking / vaping.</p>	
8. Importance of asthma/COPD management or smoking/vaping cessation	The competitor has a clear understanding of the importance of their selected topic and commands the room when sharing this information with the judges. Information is accurate and shared with passion in a way that showcases the importance of the topic.	The competitor shares the importance of their topic with the judges. Information is accurate and relatable to the audience.	The competitor shares the importance of their topic but lacks urgency or enthusiasm that helps the messaging come through.	The competitor includes a few statements about the importance of their selected topic but leaves significant room for improvement.	The presentation does not include information about the importance of the disease management or cessation process.	

Presentation Content	Excellent 10 points	Good 8 points	Average 6 points	Fair 4 points	Poor 0 points	JUDGE SCORE
9. Distinctive / Captivating / Unique	The competitor provided a highly creative, original, and imaginative presentation that was highly distinct. It stood out and was unique.	The presentation was unique and offered a fresh approach to the topic; however, it was missing the "wow" factor.	The presentation was adequately distinctive. Would like to see more creativity and innovation in the approach to the presentation.	The presentation was unoriginal and included more box checking than critical thinking.	No evidence of imagination or creativity was used in the presentation.	
C. Presentation Organization and Materials	Excellent 5 points	Good 4 points	Average 3 points	Fair 2 points	Poor 0 points	JUDGE SCORE
1. Flow, Logic, and Transitions	There is evidence of practice and consistency of presentation flow using transitions.	There is evidence of practice and some consistency in presentation flow using transitions.	The presentation could benefit from a more consistent flow using transitions.	More practice is needed to achieve an authentic flow in the presentation.	The entire presentation is delivered with a lack of attention to flow and transitions.	
2. Opening	The competitor clearly establishes the occasion and purpose of the presentation, grabs the audience's attention, and makes the audience want to listen.	The competitor introduced the presentation adequately, including an attention getter and established the occasion and purpose of the presentation.	The competitor introduced the topic but did not clearly establish the occasion and/or purpose of the presentation. Weak attention getter.	The competitor failed to introduce the presentation. Or the introduction was not useful in indicating what the presentation was about.	The competitor did not provide any kind of opening statement or action.	
3. Closing	The competitor prepares the audience for ending and ends memorably. They drew the presentation to a close with an effective memorable statement.	The competitor adequately concluded the presentation and ended with a closing statement. Clear ending but ends with little impact.	The competitor concluded the presentation in a disorganized fashion.	Audience has no idea conclusion is coming. Competitor's closing message was unclear.	The competitor ended the presentation abruptly without any kind of conclusion.	
4. Presentation Visual Aids / Tools / Technology	All visual aids, props, tools, and/or technology used adds value and relevance to the presentation. They help to tell a story and offer a better understanding of the subject. Creativity is evident.	Most visual aids, props, tools, and/or technology support the theme of the presentation and complement the overall message.	Some of the visual aids, props, tools and/or technology add some value to the presentation but could have supported the overall message more effectively.	The visual aids used offered minimal support or missed the opportunity to enhance the overall presentation.	No visual aids were used to complement the presentation.	
D. Presentation Delivery	Excellent 5 points	Good 4 points	Average 3 points	Fair 2 points	Poor 0 points	JUDGE SCORE
1. Voice Pitch, tempo, volume, quality	The competitor's voice was loud enough to hear. The competitor varied rate & volume to enhance the presentation. Appropriate pausing was employed.	The competitor spoke loudly and clearly enough to be understood. The competitor varied rate OR volume to enhance the presentation. Pauses were attempted.	The competitor could be heard most of the time. The competitor attempted to use some variety in vocal quality, but not always successfully.	Judges had difficulty hearing /understanding much of the presentation due to little variety in rate or volume.	The competitor's voice is too low or monotone. Judges struggled to stay focused during the majority of presentation.	

D. Presentation Delivery	Excellent 5 points	Good 4 points	Average 3 points	Fair 2 points	Poor 0 points	JUDGE SCORE
2. Stage Presence Poise, posture, eye contact, and enthusiasm	Movements & gestures were purposeful and enhanced the delivery of the presentation and did not distract. Body language reflects comfort interacting with audience. Facial expressions and body language consistently generated a strong interest and enthusiasm for the topic.	The competitor maintained adequate posture and non-distracting movement during the presentation. Some gestures were used. Facial expressions and body language sometimes generated an interest and enthusiasm for the topic.	Stiff or unnatural use of nonverbal behaviors. Body language reflects some discomfort interacting with audience. Limited use of gestures to reinforce verbal message. Facial expressions and body language are used to try to generate enthusiasm but seem somewhat forced.	The competitor's posture, body language, and facial expressions indicated a lack of enthusiasm for the topic. Movements were distracting.	No attempt was made to use body movement or gestures to enhance the message. No interest or enthusiasm for the topic came through in presentation.	
3. Diction*, Pronunciation** and Grammar	Delivery emphasizes and enhances message. Clear enunciation and pronunciation. No vocal fillers (ex: "ahs," "uh/ums," or "you-knows"). Tone heightened interest and complemented the verbal message.	Delivery helps to enhance message. Clear enunciation and pronunciation. Minimal vocal fillers (ex: "ahs," "uh/ums," or "you-knows"). Tone complemented the verbal message	Delivery adequate. Enunciation and pronunciation suitable. Noticeable verbal fillers (ex: "ahs," "uh/ums," or "you-knows") present. Tone seemed inconsistent at times.	Delivery quality minimal. Regular verbal fillers (ex: "ahs," "uh/ums," or "you-knows") present. Delivery problems cause disruption to message.	Many distracting errors in pronunciation and/or articulation. Monotone or inappropriate variation of vocal characteristics. Inconsistent with verbal message.	
Total Points (130):						

*Definition of Diction – Choice of words especially with regard to correctness, clearness, and effectiveness.

**Definition of Pronunciation – Act or manner of uttering officially.

RESPIRATORY THERAPY RD 2

Section # _____ Division: _____ SS _____ PS/C
 Competitor # _____ Judge's Signature _____

For use with unconscious patient-who is not breathing.

Skill I: Basic Airway Management (Time: 4 minutes)		Possible	Awarded
1.	Gathered equipment.	1 0	
2.	Washed hands or used alcohol-based hand-rub for hand hygiene and put on gloves.	2 0	
3.	Identified self.	2 0	
4.	Assessed for responsiveness. Judge states, "patient is not responding".	2 0	
5.	Performed Head Tilt Chin Lift a. Held the mandible with the middle and index finger of one hand.	2 0	
	b. Lifted the chin forward to displace the mandible anteriorly while tilting the head back with the other hand on the forehead.	2 0	
6.	Checked for breathing and pulse simultaneously. Judge states, "pulse is evident, no breathing noted".	2 0	
7.	Attached BVM to 100% O ₂ .	2 0	
8.	Positioned self at the top of the patient's head.	2 0	
9.	Applied mask tightly to the face.	2 0	
10.	Manually ventilated.	2 0	
11.	Observed for chest rise and fall. If no chest rise, repositioned.	2 0	
12.	Ventilated every 5 to 6 seconds until airway adjunct is placed with chest rise evident.	2 0	
13.	Washed hands or used alcohol-based hand-rub for hand hygiene.	2 0	
14.	Documented in patient's chart.	2 0	
15.	Used appropriate verbal and nonverbal communication with patient and other personnel.	2 0	
16.	Practiced standard precautions throughout skill.	2 0	
TOTAL POINTS -- SKILL I 70% Mastery for Skill I = 23.1		33	

RESPIRATORY THERAPY RD 2

Section # _____ Division: _____ SS _____ PS/C
 Competitor # _____ Judge's Signature _____

Skill II Donning & Removing Transmission-Based Isolation Garments		Time: 4 minutes		Possible	Awarded
1.	Assembled equipment.	1	0		
2.	Verbalized "hands have been washed & jewelry removed".	2	0		
3.	Donning Gown:				
	a. If sleeves are long rolled up above elbows before applying gown.	2	0		
	b. Lifted the gown by placing the hands inside the shoulders.	2	0		
	c. Worked arms into the sleeves of gown by gently twisting.	2	0		
	d. Placed hands inside the neckband and adjusted until in position and tied the bands at the back of the neck.	2	0		
	e. Reached behind and folded the edges of the gown so that uniform is completely covered and tied the waistband.	2	0		
4.	Donning Mask:				
	a. Secured mask under the chin and covered mouth and nose.	2	0		
	b. Either placed elastic bands behind ears or tied mask securely behind head and neck by tying top ties first and bottom ties second.	2	0		
5.	Donning Gloves: Put gloves on and made sure that gloves covered the top cuff of the gown.	2	0		
6.	Judge states "Skill completed". Removing Gown: Untied the waist ties and loosened the gown at the waist.	2	0		
7.	Removing Gloves:				
	a. Removed first glove by grasping the outside of the cuff with the opposite gloved hand and placed the glove over the hand so it is inside out.	2	0		
	b. Removed the second glove by placing the bare hand inside the cuff and pulled glove off so it is inside out.	2	0		
	c. Placed the gloves in the infectious waste container.	2	0		
	d. Washed hands or used alcohol-based hand-rub for hand hygiene,	2	0		
8.	Removing Gown:				
	a. Untied the neck ties and loosened the gown at the shoulders handling only the inside of the gown.	2	0		
	b. Slipped the fingers of one hand inside the opposite cuff without touching the outside of gown and pulled the sleeve down over the hand	2	0		
	c. Used the gown-covered hand and pulled sleeve down over the opposite hand.	2	0		

Skill II Donning & Removing Transmission-Based Isolation Garments (con't) - Items Evaluated		Possible	Awarded
d. Eased arms and hands out of the gown, keeping the gown in front of the body and avoided outside of gown with hands.		2 0	
e. With hands inside the gown, brought the shoulders together and turned so the gown is inside out.		2 0	
f. Folded the gown in half and rolled together.		2 0	
g. Placed gown in infectious waste container.		2 0	
9. Removing Mask:			
a. Untied bottom ties first followed by the top ties or removed from behind ears.		2 0	
b. Held mask by top ties only and dropped into infectious waste container.		2 0	
10. Washed hands or used alcohol-based hand-rub for hand hygiene.		2 0	
TOTAL POINTS -- SKILL II		49	
70% Mastery for Skill II = 34.3			

RESPIRATORY THERAPY RD 2

Section # _____ Division: _____ SS _____ PS/C
 Competitor # _____ Judge's Signature _____

Scenario will include method of administration and liter flow per minute (cannula only).

Skill III: Administering Oxygen via Nasal Cannula (Time: 6 minutes)		Possible	Awarded
1.	Obtained and reviewed physician's order (scenario).	2 0	
2.	Obtained needed equipment.	1 0	
3.	Washed hands or used alcohol based hand-rub for hand hygiene	2 0	
4.	Approached, greeted, and identified patient using two patient identifiers.	2 0	
5.	Explained the procedure and obtained consent.	2 0	
6.	Connected the tubing from the oxygen supply to the tubing on the cannula.	2 0	
7.	Verbalized that humidifier is properly attached to the flow meter.	2 0	
8.	Turned on the oxygen supply.	2 0	
9.	Regulated the gauge to the correct liter flow.	2 0	
10.	Checked to be sure the oxygen is passing through the tubing by placing hand by the outlet on the cannula.	2 0	
11.	Washed hands or used alcohol based hand-rub for hand hygiene and put on disposable gloves.	2 0	
12.	With the oxygen flowing, applied nasal cannula.	2 0	
13.	Cannula:	2 0	
	a. Placed two tips in the patient's nostrils and looped the tubing around each ear.	2 0	
	b. Adjusted the straps at the neck so the tips remain in position.	2 0	
	c. Instructed patient to breathe through the nose.	2 0	
14.	Checked surrounding area to make sure all safety precautions are observed – no sparks or flames.	2 0	
15.	Removed gloves.	2 0	
16.	Washed hands or used alcohol-based hand-rub for hand hygiene.	2 0	
17.	Documented in patient's chart.	2 0	
18.	Used appropriate verbal and nonverbal communication with patient and other personnel.	2 0	
19.	Practiced standard precautions throughout skill.	2 0	
TOTAL POINTS – SKILL III 70% Mastery for Skill III = 28.7		41	

RESPIRATORY THERAPY RD 2

Section # _____ Division: _____ SS _____ PS/C
 Competitor # _____ Judge's Signature _____

Skill will be performed with a portable pulse oximetry and probe.

Skill IV: Pulse Oximetry (Time: 4 minutes)		Possible	Awarded
1.	Obtained and reviewed physician's order (scenario).	2 0	
2.	Obtained needed equipment.	1 0	
3.	Washed hands or used alcohol-based hand-rub for hand hygiene.	2 0	
4.	Approached, greeted, and identified patient using two patient identifiers.	2 0	
5.	Provided privacy.	1 0	
6.	Explained the procedure and obtained consent.	2 0	
7.	Properly assembled equipment and tested equipment prior to patient application.	1 0	
8.	Selected appropriate placement of probe of the pulse oximeter. a. For adult or child placed probe of the pulse oximeter to a finger, earlobe, or toe. b. For event, placed probe on the palm of the hand, foot, big toe, or thumb.	2 0	
9.	Assured the skin site is clean, or nail bed is free from polish, for best reading and waveform.	1 0	
10.	Attached SpO ² disposable probe to pulse oximetry monitor.	1 0	
11.	Turned on oximeter and assured power to the unit.	1 0	
12.	Examined probe to assure colored light emitting from diode.	1 0	
13.	Placed pulse oximetry probe, per manufacturer guidelines, on appropriate site; assured good contact.	1 0	
14.	Avoided excessive pressure to site and limited patient movement. Reduced dampening and artifact.	1 0	
15.	Waited a few seconds for the pulse & percentage of oxygen saturation to appear on the monitor screen.	1 0	
16.	Assured measurement of the patient's oxyhemoglobin status (SpO ²) and heart rate (Pulsatile).	1 0	
17.	Notified appropriate personnel (judge) of SpO ² and verbalized if level is in normal range.	2 0	
18.	Appropriately documented procedure in medical record.	2 0	
19.	Washed hands or used alcohol-based hand-rub for hand hygiene.	2 0	
20.	Used appropriate verbal and nonverbal communication with patient and other personnel.	2 0	
21.	Practiced standard precautions throughout skill.	2 0	
TOTAL POINTS – SKILL IV 70% Mastery for Skill IV = 21.7		31	

RESPIRATORY THERAPY RD 2

Section # _____ Division: _____ SS _____ PS/C
 Competitor # _____ Judge's Signature _____

Skill V: Assessment of Newborn (Time: 5 minutes)		Possible	Awarded
1.	Obtained needed equipment.	1 0	
2.	Washed hands or used alcohol-based hand-rub for hand hygiene.	2 0	
3.	Put on disposable gloves.	2 0	
4.	Identified self.	2 0	
5.	Dried infant (manikin) and removed wet towel.	2 0	
6.	Placed infant in warmer in supine position.	2 0	
7.	Positioned head closest to competitor and in neutral position or slightly extended.	2 0	
8.	Verbalized bulb suction would be used if blood or meconium is noted.	2 0	
9.	Inspected the chest and noted breathing pattern. Judge states, "infant has spontaneous respirations without cry".	2 0	
10.	Provided tactile stimulation for one minute. Judge states, "heart rate greater than 100 beats/min and respirations are adequate".	2 0	
11.	Verbalized to the judge that the APGAR score was completed at 1 and 5 minutes.	2 0	
12.	Ensured patient's safety and comfort.	2 0	
13.	Washed hands or used alcohol-based hand-rub for hand hygiene.	2 0	
14.	Documented in patient's record.	2 0	
15.	Used appropriate verbal and nonverbal communication with patient and other personnel.	2 0	
16.	Practiced standard precautions throughout skill.	2 0	
TOTAL POINTS – SKILL V			
70% Mastery for Skill V = 21.7		31	

RESPIRATORY THERAPY RD 2

Section # _____ Division: _____ SS _____ PS/Collegiate
 Competitor # _____ Judge's Signature _____

Skill VI	Measure and Record Vital Signs (Time: 8 minutes)	Possible	Awarded
1.	Assembled equipment and supplies.	1 0	
2.	Washed hands or used alcohol-based hand-rub for hand hygiene.	2 0	
3.	Greeted patient and introduced self.	1 0	
4.	Identified patient using two patient identifiers.	2 0	
5.	Explained vital sign skill.	2 0	
6.	Positioned patient comfortably.	1 0	
7.	RADIAL PULSE		
a.	Positioned patient's hand and arm so they were well supported and rested comfortably with palm pointed downward.	1 0	
b.	Located the radial artery by placing middle and index finger toward the inside of the patient's wrist on the thumb side.	1 0	
c.	Exerted light pressure, counted for full minute.	1 0	
8.	RESPIRATION		
a.	Continued pulse position to keep patient unaware of counting.	1 0	
b.	Counted regular respirations for full minute (counting each expiration and inspiration as one respiration).	1 0	
9.	Verbalized pulse count and respiration count within +/- 2 of judge's count.	4 0	
10.	Described quality characteristics of pulse (volume – character strength, and rhythm - regularity) AND respirations (depth and rhythm) to judge.	4 0	
11.	Recorded pulse and respiration accurately on the graphic form.	4 0	
12.	BLOOD PRESSURE		
a.	Cleaned earpieces and diaphragm of the stethoscope	2 0	
b.	Exposed patient's upper arm and positioned the arm so that it rests level with the heart with the palm turned upward.	1 0	
c.	With the valve open, squeezed the cuff to make sure it is completely deflated.	1 0	
d.	With fingertips located the brachial artery where center of cuff will be located.	1 0	
e.	Wrapped cuff around patient's arm above the elbow, snugly and smoothly about 1 - 2 inches above the elbow.	1 0	

Skill VI Measure and Record Vital Signs (con't) - Items Evaluated		Possible	Awarded
f.	Placed the center of the cuff above the brachial artery.	1 0	
g.	Palpatory Systolic Pressure: Found radial pulse and fingers remained on radial pulse.	1 0	
h.	Closed valve on bulb, by turning clockwise.	1 0	
i.	Inflated the cuff until the radial pulse disappeared.	1 0	
j.	Continued to inflate cuff 30 mm Hg above this point.	1 0	
k.	Slowly released the pressure while watching the gauge.	1 0	
l.	When the pulse is felt again noted the reading (palpatory systolic pressure).	1 0	
m.	Correctly positioned earpieces of stethoscope in ears.	1 0	
n.	Palpated brachial artery.	1 0	
o.	Placed stethoscope over brachial artery.	1 0	
p.	Inflated the cuff to 30 mm Hg above palpatory systolic pressure.	1 0	
q.	Deflated the cuff by slowly turning the valve counterclockwise at an even rate of 2 – 3 mm Hg per second.	2 0	
r.	Continued deflating the cuff slowly and noted the first sound and the last sound.	1 0	
s.	Completely deflated the cuff and removed cuff from patient's arm and made patient comfortable.	1 0	
t.	Recorded blood pressure accurately on graphic form.	4 0	
u.	Cleaned earpieces of stethoscope.	2 0	
v.	Replaced equipment appropriately.	1 0	
w.	Maintained accuracy within +/- 2 mm Hg of judge's reading of systolic pressure.	4 0	
x.	Maintained accuracy within +/- 2 mm Hg of judge's reading of diastolic pressure.	4 0	
13.	Washed hands or used alcohol based hand-rub for hand hygiene.	2 0	
14.	Executed all vital sign skills (pulse, respiration and blood pressure) smoothly and in logical order, overlapping skills to maximize efficiency of time.	1 0	
15.	Observed all checkpoints before leaving the patient: placed call signal within easy reach, lowered bed, positioned patient in good body alignment, and reported any changes to the nurse.	2 0	
16.	Used appropriate verbal and nonverbal communication with patient and other personnel.	2 0	
17.	Practiced standard precautions throughout skill.	2 0	
TOTAL POINTS – SKILL VI 70% Mastery for Skill VI = 49.7		71	

		Attending Physician												Patient Name Last Name: First Name:											
Date																									
		0 0 0	0 4 0	0 8 0	1 2 0	1 6 0	2 0 0	0 0 0	0 4 0	0 8 0	1 2 0	1 6 0	2 0 0	0 0 0	0 4 0	0 8 0	1 2 0	1 6 0	2 0 0	0 0 0	0 4 0	0 8 0	1 2 0	1 6 0	2 0 0
Pulse	140																								
	130																								
	120																								
	110																								
	100																								
	90																								
	80																								
	70																								
	60																								
Respiration	50																								
	40																								
	30																								
	20																								
	10																								
Blood Pressure																									
Weight																									

RESPIRATORY THERAPY RD 2

Section # _____ Division: _____ SS _____ PS/C
 Competitor # _____ Judge's Signature _____

Skill VII: Hand-Held Nebulizer (Time: 8 minutes)		Possible	Awarded
1.	Obtained and reviewed physician's order (scenario).	2 0	
2.	Obtained needed equipment.	1 0	
3.	Obtained medication as ordered (per scenario).	2 0	
4.	Provided privacy.	2 0	
5.	Washed hands or used alcohol-based hand-rub for hand hygiene.	2 0	
6.	Approached, greeted, and identified patient using two patient identifiers.	1 0	
7.	Interviewed patient and obtained relevant history (home nebulizer use).	1 0	
8.	Explained the procedure and obtained consent.	2 0	
9.	Performed baseline physiology assessment:	2 0	
	a. pulse		
	b. breath sounds	2 0	
10.	Washed hands or used alcohol-based hand-rub for hand hygiene.	2 0	
11.	Properly assembled equipment and tested equipment prior to patient application.	1 0	
12.	Prepared medication:	2 0	
	a. Accurately prepared prescribed medication.		
	b. Aseptically injected medication into delivery device.	2 0	
13.	Activated gas flow to meet manufacturers flow rate of 6 to 10 L.	2 0	
14.	Selected mouthpiece delivery system and connected to compressor.	1 0	
15.	Coached patient to breathe slowly through the mouth and hold breath after 5-6 regular breaths.	1 0	
16.	Monitored patient for adverse response to treatment and noted if:	2 0	
	a. Patient's HR increased greater than 30 BPM - stopped		
	b. Patient's RR increased to above 22 breaths per minute – stopped.	2 0	
17.	Assessed patient's response to therapy during treatment. (Verbalized would listen to breath sounds for improvement).	2 0	
18.	Continued treatment until nebulizer begins to sputter. Judge states, "nebulizer has begun to sputter".	1 0	
19.	Stopped nebulizer and encouraged patient to cough.	2 0	

Skill VII: Hand-Held Nebulizer (con't)		Possible	Awarded
20.	Rinsed the nebulizer with sterile water and air dried or discarded.	1 0	
21.	Washed hands or used alcohol-based hand-rub for hand hygiene.	2 0	
22.	Appropriately documented procedure in medical record.	2 0	
23.	Used appropriate verbal and nonverbal communication with patient and other personnel.	2 0	
24.	Practiced standard precautions throughout skill.	2 0	
TOTAL POINTS – SKILL VII 70% Mastery for Skill VII = 32.2		46	

Competitor ID # _____

HOSA HOSPITAL Treatment Notes

[illegible]